HOUSE HEALTH CARE COMMITTEE BILL - H.481 (Proposed Changes)

3/31/15 proposal

DRAFT 3/31/15 - BL

COST ESTIMATES	STIMATES SFY '16 COST ESTIMATES						ST ESTIMATES	*	
ec.	Start Date	State \$	Fed \$	<u>Other</u>	Gross (est.) \$	State \$	Fed \$	<u>Other</u>	Gross (est.) \$
Undersinsured									
N/A Current cost-sharing subsidies (not yet in HHC Bill)	Existing	761,308			761,308	1,613,972			1,613,972 < Added to sheet after HHC passed bill
1,2 Cost sharing subsidies	1/1/2016	2,000,000			2,000,000	4,240,000			4,240,000
3 Medicaid Rate Increase / Cost Shift / Price Different	ial	<u>6,187,755</u>	7,033,297		13,221,052	<u>6,836,579</u>	<u>7,811,105</u>		<u>14,647,684</u>
Hospital Outpatient rate increases	7/1/2015	0	0		0	0	0		0 0.4471
Primary Care rate increase	7/1/2015	3,286,655	3,713,345		7,000,000	3,385,255	3,824,745		7,210,000 0.4695
Professional services rate increases	7/1/2015	2,451,400	2,769,652		5,221,052	2,524,942	2,852,742		5,377,684 0.4695
Dartmouth Hitchcock	7/1/2015	449,700	550,300		1,000,000	926,382	1,133,618		2,060,000 0.4497
6 Blueprint for Health		<u>2,584,197</u>	3,162,295		<u>5,746,492</u>	<u>2,664,074</u>	3,082,418		<u>5,746,492</u>
Community Health Team (CHT) Rebalance	7/1/2015	420,769	514,897		935,666	433,775	501,891		935,666
Increase CHT payments	7/1/2015	526,959	644,843		1,171,802	543,247	628,555		1,171,802 < Increases base from \$1.50 to \$2.25 PMPM
Increase Primary care med home payments	7/1/2015	1,636,469	2,002,555		3,639,024	1,687,052	1,951,972		3,639,024 < Increases base from \$2 to \$3.5 + \$1.50 for P4P payment
8 Health Care Advocate (One time)	7/1/2015	40,000			40,000	N/A			N/A
Other Medicaid rate increases									
5a Increase for other providers (1.5%)	7/1/2015	3,055,596	3,739,147		6,794,743	3,244,544	3,754,041		6,998,585 < adjusted down from 2.5% to 1.5%
5b Home Health (payment reform) - (One time)	7/1/2015	89,940	110,060		200,000				< Implemenation of payment reform. No rate increase.
Green Mountain Care Board		<u>1,154,822</u>	<u>546,723</u>	<u>1,555,975</u>	<u>3,257,520</u>	<u>1,045,521</u>	<u>501,460</u>	<u>1,416,786</u>	<u>2,963,767</u>
All payer waiver / Rate-setting process (w/ Cost shift)	7/1/2015	1,154,822	546,723	1,495,975	3,197,520	1,045,521	501,460	1,356,786	2,903,767
2a VITL Oversight **	7/1/2015			60,000	60,000			60,000	60,000 < HIT fund \$'s for state share of billback
Vermont Household Insurance Survey (One time)	7/1/2015	150,000			150,000				< One time
7 AHEC	7/1/2015	300,000	400,000		700,000	300,000	400,000		700,000 < Restores cut from Admin's proposal
16 Task Force on Universal Coverage	7/1/2015		can be covered	d within existir					< Proposal due 12/1/2015
21 Universal Primary Care Study (One time)	7/1/2015	200,000			200,000				< Report due 10/15/2015
TOT		16,523,618	14,991,521	1,555,975	33,071,115	19,944,690	15,549,024	1,416,786	36,910,500
	HIT FUND	0	0	60,000	60,000	0	0	60,000	
	To be financed	16,523,618	14,991,521	1,495,975	33,011,115	19,944,690	15,549,024	1,356,786	36,850,500

NOTES:

^{*} SFY'17 assumes annualized costs. Also assumes both loss of Leahy bump and modest decrease in federal match.

^{**} VITL Oversight -- proposes using HIT fund dollars for the state share of billback.

^{***} Sec. 29a repeals the July 1, 2017 sunset of the 0.199% claims assessment for the HIT fund. There would be no impact in SFY' 16.